Attorney Docket No. 3782-0268PUS2

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING BIRCH, STEWART, KOLASCH & BIRCH, LLP
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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that; my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	ON-DEMAND PRINTING OF CODING PATTERNS									
Fill in Appropriate	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set									
	forth above and/or the following:									
Information -	The specification was filed onas United States Application Number;									
For Use Without			(if applicable							
Specification	and amended o			(п аррисави	e) and/or as PCT					
Attached:	the specification International A		; and was							
		pplication Numb		(if at	*					
	amended on(if applicable)									
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as									
	amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.									
	I do not know and do not believe the same was ever known or used in the United States of America before my or our invention									
	thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year									
	prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the									
	date of this application in any country foreign to the United States of America on an application filed by me or my legal									
	prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this									
	parent or inventor's certificate on this invention has been filed in any country to right to the Officed States of America prior to this application by me or my legal representatives or assigns, except as follows.									
	application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, \$119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate.									
	a filing date before th	hat of the applicat	tion on which priority	y is claimed:						
	Prior Foreign App	lication(s)				Priority (Claimed			
Insert Priority	0301729-0	S.v.	eden	T	ne 13, 2003	. ≥1	🖸			
Information:	(Number)	(Country)		/Month/T	Day/Year Filed)	Yes	No			
(if appropriate)	(IAUDIDEI)	(Country)		· (Monay 2	say, real racu,	163	140			
	(Number)	(Country)		(Month/I	Day/Year Filed)	Yes	No			
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	(Number)	(Country)		(Month/L	Day/Year Filed)	Yes	No			
	(Number)	(Country)		(Month/I	Day/Year Filed)	Yes	No			
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	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.									
Insert Provisional										
Application(s):	(Application Number)			(Filing	(Filing Date)					
(if any)										
	(Application Numbe	er)		g Date)						
	All Provides Applications of one for one Debug or Insurative Configurate Filled Many than 12 Marsha (C. Novides C. D. C.									
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to									
	the Filing Date of This Application:									
	Country		Application Numb	ber	Date of Filing (Montl	h/Day/Year)				
Insert Requested										
Information:										
(if appropriate)										
	I have by claim the bonest under Title 35. United States Code \$120 of any United States and for DCT and including for									
	I hereby chain the benefit three Three 50, officed States Code, \$120 of any Onited States and/or reliapplication(s) listed below and, insofar as the subject matter of each of the claims of this application is not									
	disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States									
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT									
	international filing date of this application.									
		and or and applica								
Insert Prior U.S.	60/477,926		June 13, 2003			abandoned				
Application(s):	(Application Numbe	r)	(Filing Date)		(Status - patented, pe	ending, abandon	ed)			
(if any)										
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Page 1 of 2 (Rev. 05/2004)	(Application Numbe	er)	(Filing Date)		(Status - patented, pe	maing, abandone	ed)			

Attorney Docket No.

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000

Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ull Name of First or Sole Inventor: neert Name of Inventor neert Date This Document is Signed	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE						
Inventor neert Date This Document is Signed	Stefan LYNGGAARD	South	er-	11/15/05						
nsert Residence	Residence (City, State & Country)	CITIZENSHIP								
nsert Citizenship →	Lund, Sweden	Sweden								
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)									
	Neversvägen 43; S-224 79 Lund; SWEDEN									
'ull Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)	CITIZENSHIP								
	MAILING ADDRESS (Complete Street Ad	ddress including City, State & Country)								
Full Name of Third Inventor, il any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSH	IP .						
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
full Name of Fourth Invenior, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)		CITIZENSHI	IP .						
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
oil Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)	CITIZENSHIP								
	MAILING ADDRESS (Complete Street Address including City, State & Country)									
iull Name of Sixth Inventor, II any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*						
	Residence (City, State & Country)	CITIZENSHIP								
	MAILING ADDRESS (Complete Street Ad	dress including City, State & Country)								

(Rev. 05/2004)

*DATE OF SIGNATURE